| TRANSMIT  | TAL OF PAYME<br>(37 C.)   | III  | Docket No.<br>939-012029-US (PAR)                               |  |  |  |  |  |  |  |
|---|---|--|---|--|--|--|--|--|--|--|
| Applicant(s):  Jacob Midtgaard  |   |  |   |  |  |  |  |  |  |  |
| Application No.<br>10/518,329   | Filing Date<br>11/02/2005   | Examiner<br>Kinkead, Arnold M.   | Customer No.<br>2512  | Group Art Unit<br>2817   | Confirmation No. 6747                  |  |  |  |  |  |
| Invention:<br>PHAS  | SE-LOCKED LOOP  | CIRCUIT  |   |  |  |  |  |  |  |  |
| Mail Stop Issue Fee COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450          |   |  |   |  |  |  |  |  |  |  |
|   | 1,400.00 Ce: \$ 300.00  | or the above-identified applicati<br>∟-85<br>□ Design Fee:<br>is attached.                     |   | Plant Fee:   | -                                      |  |  |  |  |  |
| □ The Director is as described by Cha     □ Cha     □ Crec     □ Payment by cr.  WARNING: In: | s hereby authorized to below.  arge the amount of edit any overpayment. arge any additional feredit card. Form PTO offormation on this formation on this formation on this formation. | to charge and credit Deposit Ac t. ee required2-2038 is attached. form may become public. Cre- | edit card inform  | 16-1350  |  |  |  |  |  |  |
| Joseph V. Gambe<br>Registration No. 4   | Signature<br>erdell, Jr.  | predit card information and au   |   |  |  |  |  |  |  |  |
|   | icate of Transmission by<br>rtificate may only be use<br>by deposit account.  | ed if paying   | Certificate of M  | ailing by First Clas   | ss Mail                                |  |  |  |  |  |
|   | document and authorizati  | tion to charge deposit<br>to the United States<br>) I hereby<br>with the<br>first class        | United States Post<br>is mail in an envelo<br>P.O. Box 1450, Al | s correspondence is<br>stal Service with suffi<br>lope addressed to "C<br>klexandria, VA 22313 | ficient postage as<br>Commissioner for |  |  |  |  |  |
| -   | Signature   |  | Signature of Perso  | on Mailing Correspon   | 1dence                                 |  |  |  |  |  |
| Typed or Print  | ed Name of Person Signing   | g Certificate Type   | Typed or Printed Name of Person Mailing Correspondence          |  |  |  |  |  |  |  |

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

08 21 2006

2500

04/01/85 (Rev. 07/06) Approved for use through 04/30/2007

PERMAN & GREEN

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

OMB 0651-0033 U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMUNICAL

Certificate of Mailing or Transmission

or Fax (571)-273-2885

INSER CHONS. This form should be used for transmitting the ISSUE FTF and PLBLICATION FTE infrequency. Blocks 1 through 5 should be completed where pays open as: All traffect correspondence including the Plant, a stransce orders and nonficiation of maintenance fees will be maded to the current correspondence address as callested an also correspondence address and or the plant of market address and or the plant of market address and or the plant of special plants or an address and or the plants. All of the plants are part of FTE, DDDRESS for the plants of th in reson e fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Forts) framenital. This certificate cannot be used for any other accompanying papers. Each additional papers, which as a assignment or formal drawing, must have its own certificate of mailing or transmission. and a first contest of the North Address Associated the second section of the second sections of the second section of the secti

| PERMAN & C<br>425 POST ROA<br>F VIRFIELD, C                            | AD.   |   | I he<br>Stat<br>add<br>tran  | I hereby certify that this Feet's Transmitud is being deposited with the United<br>States Fostal Service with sufficient postage for first class mail in an envelop<br>addressed to the Mail Stop ISSUE FEE address above, or being facsimil-<br>transmitted to the USPTO [571] 273-2885, on the date indicated below. |  |   |  |
|--|---|---|--|--|--|---|--|
|  |   |   |  |  |  | (Depositar's name)                                |  |
|  |   |   | L  |  |  | (\$1)ниноер                                       |  |
|  |   |   | L  |  |  | 11Anes  |  |
| APPLICATION NO.  | FILING DATE   |   | FIRST NAMED INVENTOR   | ATD  | JRNEY DOCKET NO                                      | CONFIRMATION NO                                   |  |
| 10.518,329<br>FITLE OF INVENTION                                       | 11 02:2005<br>s. PHASE-LOCKED 1.0   | OOP CIRCUIT   | Jacob Midignard  | 939  | -012029-US (PAR)                                     | 6747  |  |
| APPLN TAPE   | SMALL ENTITY  | ISSUE FEE DUE   | PUBLIC ATION FEE DUE   | PREV. PAID ISSUE FEE   | DOTAL FEESIDLE                                       | DATE DUE  |  |
| nonprovisional   | NO NO   | \$1400  | \$300  | SO SO  | \$1700   | 11 21 2006  |  |
| IXW  | UNER  | ARTUNIT   | CLASS-SUBCLASS   | 1  | 31700  | 11 21 2006  |  |
| KINKLAD.   |   | 2817  | 331-016000   | J  |  |   |  |
| U"Loc Address" ind<br>PTO SB 47, Rev 03-0<br>Number is required.       | ondence address for Cha<br>3 122) attached<br>action (or "Fee Address<br>12 or more recent) attack<br>ND RESIDENCE DAT;<br>ess an assignee is ident<br>him 3 CFR 3.11. Comp | inge of Correspondence  "Indication form ted. Use of a Customer  A TO BE PRINTED ON | or agents OR, afternativ<br>(2) the name of a single<br>registered attorney or a | 3 registered patent attor-<br>rely, e firm (having as a memb<br>gent) and the names of u<br>meys or agents. If no nan<br>printed.  tel.)   | p to a 2 p to lee is 3                               | & Green, LLP                                      |  |
| a Tae following feets) a<br>図 Issue Fee                                | rate assignee category or   | 46  | Espoo, Finla inted on the patent):   | nd Individual XX Corporate se first reapply any prev   | on or ruher private grou<br>fously paid issue fee sh | own above)  |  |
| ☐ Advance Order - >  |   |   | The Director is hereby overpayment, to Depos                                     | authorized to charge the it<br>it Account Number 16  | equired feets), any defic<br>.1350 (enclose an       | ciency, or credit any<br>extra copy of this form) |  |
| a Applicant claims . ا   | us tfrom status indicated<br>SMACLENTITY statu<br>Publication Feezil requ<br>econds of the United Stat  | s. See 37 CFR 1.27.   | b. Applicant is no long<br>from anyone other than the                            | er elanning SMALL FNT  | TTY status. See 37 CFR                               | 1.27(0)(2)  |  |
| Consisted Signature  In pedior printed name  is collection of informa- | Joseph V. (<br>poseph V. (<br>points required by 37 (1)<br>application form to the<br>owns for reducing his him-<br>elima 2731 J. LISO (DO)                                 | Gamberdell, Jr  |  | Date 22 Septe Registration No 4  | mber 2006<br>4,695                                   | y the USPTO to mucess)                            |  |
|  |   |   | and to a collection of infor   |  |  |   |  |
|  |   |   |  |  |  |   |  |